

Pharmacist: Phil Pill RPh.

Patient Name: Lucy Silver

Physician Name: Dr. Wu Zing

Rx# 5476

Rx. Date 04/1/2020

Exp. Date 4/1/2021

# **Meds R US Pharmacy**

## **Controlled Drug Disposition Form**

## Allergic to PCN

Drug Name: Ativan

Date Received: \_\_\_\_\_

Drug Strength: 1 mg

Received By:

Drug Form: Tablet

Amount Rec'd:

Dose: 1 tab PO TID

### Amount Returned

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